## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fay: (57)1-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Pateat, dayance orders and notification of maintenance feest will be mailed to the current correspondence address as includent undersecreted below or directed underswife in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate FEE ADDRESS\* for

maintenance fee notification	ns.	nermme in Block 1, by	a, speenying a new come		and or (b) marcaning a sep		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				e: A certificate of	mailing can only be used f	or domestic mailings of the for any other accompanying ent or formal drawing, must	
				ers. Each additiona	I paper, such as an assignm	ent or formal drawing, must	
7590 06/12/2007 Certificate of Mailing or Transmission							
Michael T. Sanderson, Esq.				hereby certify that this Fee(s) Transmittal is being deposited with the United			
King & Schickli, PLLC 247 North Broadway				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE: address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Lexington, KY 40:			transmitted to the USPTO (571) 273-2885, on the date indicated below.				
Dexingion, It I iv.				(Depositor's name)			
						(Signature)	
			L			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/073,571	02/11/2002		Bart Dahneke		971-150	5124	
TITLE OF INVENTION: METHOD AND APPARATUS FOR MAINTAINING PERIPHERAL DEVICE SUPPORT INFORMATION							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	SO	\$0	\$1400	09/12/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
CHEN, ALAN S		2182	710-015000				
<ol> <li>Change of correspondence CFR 1.363).</li> </ol>	of "Fee Address" (37	2. For printing on the patent front page, list King (1) the names of up to 3 registered patent altorneys or agents OR, alternatively,					
Change of correspond Address form PTO/SB/12	nge of Correspondence	or agents OR, alternative	3 registered patent cly,	attorneys			
"Fee Address" indicat	ion (or "Fee Address"	Indication form					
"Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			registered atterney or agent) and the names of up to 2 registered patent attempts or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Novell, Inc.			Provo, Utah				
Please check the appropriate assignce category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
□ Fissue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or eredit any overpayment, to Deposit Account Number 11 - 0978 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)							
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Duic 6-21-07							
Typed or printed name Michael T. Sanderson Registration No. 43,082							
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 12 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form under suggestions for reducing the third individual case. Any comments on the unit of the properties of complete individual case. Any comments on the unit of the properties of complete formation of the properties of the proper							

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.